

DEPARTMENT OF SOCIAL SERVICES

744 P Street, Sacramento, CA 95814



January 13, 1988

ALL COUNTY LETTER NO. 88-04

TO: ALL COUNTY WELFARE DIRECTORS


SUBJECT: IMPLEMENTATION OF AFDC HOMELESS ASSISTANCE REGULATIONS

REFERENCE: MPP 44-211.3, .4 & .5 (NONRECURRING SPECIAL NEEDS)
ACL 87-163 (AFDC HOMELESS ASSISTANCE REGULATIONS)
ACIN I-01-88 (STATUS OF FEDERAL APPROVAL)

As you were informed in All County Letter 87-163, the February 1, 1988 effective date of the regulations (RDB #1287-57) restructuring AFDC Nonrecurring Special Needs (including the addition of homeless assistance) is contingent upon Federal approval of an amendment to California's State Plan. As you were further informed via All County Information Notice I-01-88, the Department is working toward obtaining approval of the amendment. The Department and all counties must proceed with the expectation that approval enabling a February 1 effective date will be forthcoming. As also noted in previous correspondence, you will be notified of the status of this approval via electronic mail (SYSM) no later than January 29, 1988.

Attached are implementing instructions and required Notices of Action for use in implementing the provisions of these regulations.

For policy clarifications, please contact Judy Moore at (916) 324-2017 or ATSS 454-2017. If you have fiscal claiming questions, please call Stephanie Davis at (916) 323-0267 or ATSS 473-0267.


ROBERT A. HOREL
Deputy Director

Attachments

cc: CWDA

INSTRUCTIONS FOR IMPLEMENTATION OF MPP 44-211.3, .4 & .5
NONRECURRING SPECIAL NEEDS IN AFDC
(INCLUDING HOMELESS ASSISTANCE)

The regulations pertaining to AFDC Nonrecurring Special Needs have been expanded to include provisions for homeless assistance. There are also a few changes to the existing provisions.

MPP 44-211.33 - There is no provision for offsetting the amount of a nonrecurring special need payment with the liquid resources of the assistance unit (AU). An AU with more than \$100 in liquid resources is ineligible for a nonrecurring special need payment, until and unless they no longer hold more than \$100 in liquid resources. Liquid resources of \$100 or less are not considered in any manner when calculating a nonrecurring special need. Reminder: Money received in a given month which meets the definition of income is not counted as a liquid resource until the following month and then only to the extent retained.

MPP 44-211.442 - A nonrecurring special need payment for interim shelter is not available to an assistance unit who is eligible to receive the nonrecurring special need payment for homeless assistance.

MPP 44-211.5 - Provides for homeless assistance in the form of a nonrecurring special need payment to eligible families who:

- Lack a regular and fixed nighttime residence; or
- Have a primary nighttime residence that is a publicly supervised or privately operated shelter designed to provide temporary living accommodations; or
- Are residing in a public or private place not designed for, or ordinarily used as, a regular sleeping accommodation for human beings.

An AU must meet one of the above criteria to be eligible for homeless assistance. The purpose of this nonrecurring special need payment is to provide temporary shelter for homeless families and assist them in obtaining permanent housing. It is not intended to prevent families from becoming homeless (e.g., to prevent eviction).

An AU may receive homeless assistance for one incidence of homelessness every 12 months. The twelve month period begins with the first payment of homeless assistance. If a homeless AU needs less than the maximum number of days of temporary shelter assistance available because permanent housing is obtained before maximum temporary assistance is exhausted, or does not need temporary shelter assistance at all because permanent housing can be obtained immediately, no other homeless assistance would be available in that twelve month period.

Any indication that a family is homeless must be treated as a request for homeless assistance. Upon indication that a family is homeless, the county must assess the family's immediate housing needs. Upon the determination that the family meets the definition of homeless and is otherwise eligible, appropriate action to comply with payment requirements must be taken.

An immediate need payment may be made, if indicated, in addition to homeless assistance, to the extent that the immediate need payment does not meet needs intended to be covered by the homeless assistance payment. As always, AFDC payments are not treated as income nor resources in the month received.

A family need only be 1) homeless and 2) apparently eligible in order to receive a nonrecurring special need payment for temporary shelter. Temporary shelter assistance must be granted or denied within the same working day the family requests homeless assistance, or no later than the close of business the next working day if the county arranges shelter for the AU in the interim. The amount allowed for temporary shelter is \$30 per day for AUs with four or fewer members. If the AU has more than four members, this amount shall be increased by increments of one-fourth (\$7.50) per additional person, up to a maximum of an additional \$30, or a total of \$60 per day. The regulations prohibit counties from requesting verification of the expenditure of the temporary shelter assistance payment.

The temporary shelter payment may be paid for up to 21 consecutive days, and extended up to an additional 7 consecutive days for good cause (e.g., the family has made a good faith effort to locate permanent housing but has been unsuccessful, or the permanent housing located by the family will not be available within the 21 day period, etc.). An AU who receives temporary shelter assistance for one week and then obtains permanent housing is not eligible for additional temporary shelter assistance in that twelve month period, even though two (and possibly three) additional weeks of temporary shelter could have been available if needed. In cases such as these, the issuance of a special need payment for permanent housing terminates the incident of homelessness in that twelve month period for purposes of this provision.

Temporary shelter assistance is not a prerequisite to permanent housing assistance. Permanent housing assistance may be issued even if temporary shelter assistance has not been requested or issued. To be eligible for the nonrecurring special need payment for permanent housing, the monthly cost of the housing the family locates may not exceed 80% of the AU's Maximum Aid Payment (MAP), without special needs (80% of MAP figures are listed at MPP 44-402.1). If the monthly cost of housing which the AU locates exceeds 80% of the AU's MAP, the AU is not eligible for permanent housing assistance in that instance. If the housing does not exceed 80% of the MAP and the AU is otherwise eligible, payment is available for the actual reasonable costs of security deposits (including last month's rent and any legal payment or fee required by a landlord as a condition of assuming occupancy) when the deposits are a condition of securing a permanent residence. The maximum amount available for the security deposits may not exceed two months of the AU's rent. Further, the cost of necessary utility deposits shall be added to the amount allowed for security deposits.

Payment for permanent housing must be issued or denied within one working day from the time the AU provides 1) evidence that housing has been located which costs no more than 80% of the AU's MAP and 2) all information necessary for the county to establish eligibility for AFDC.

In inter-county transfer cases, the receiving county is responsible for issuing or denying a homeless assistance payment, working in conjunction with the former county to determine eligibility for homeless assistance (MPP 40-187.224). The Department is studying options for standardizing statewide information and case identification (e.g., through IEVS or MEDS) pertaining to issuance of homeless assistance. Until a system is in place, counties should maximize communication on a case-by-case basis.

Applicants for homeless assistance who have been on aid in other states are treated as any applicant; i.e., if eligible, aid (including homeless assistance) will be paid up to California's MAP, taking into consideration the amount of grant already paid by the former state as income (MPP 25-520.52).

The beginning date of aid for AFDC applicants will be the date of the first homeless assistance payment.

If an AU is sharing housing with another family on a temporary, emergency basis (e.g., because the AU is homeless), homeless assistance may be available. This assistance is not intended for an AU who is planning a routine move from one residence to another.

FOOD STAMPS IMPACT

The appropriate treatment of AFDC nonrecurring special needs payments for the homeless is currently being pursued with the Food and Nutrition Service, USDA. Specific instructions will be provided in a separate letter.

FISCAL CLAIMING INSTRUCTIONS

Temporary and permanent homeless assistance payments for eligible recipients are claimable for Federal and/or State reimbursement in the same manner in which other AFDC nonrecurring special need payments are claimed. The following claiming instructions apply to temporary homeless assistance payments to applicants.

Federal financial participation (FFP) is not claimable for payments to applicants who are subsequently determined ineligible for Federal AFDC. Persons counts for these payments must be claimed as non-Federal. Although FFP will be claimed for payments to applicants who are found to be Federally eligible, it is probable that these costs will be deferred by the Department of Health and Human Services. A deferral is the withholding of Federal funds claimed pending a determination of allowability. Therefore, counties must be able to identify and summarize all temporary homeless assistance payments to Federally eligible applicants for the days prior to the date of AFDC authorization. Specific instructions on how this is to be reported to this Department will be provided in a subsequent ACL.

All homeless assistance payments to applicants and recipients must be identified in the payrolls with an alpha code. The suggested code is HA. If a county uses an alpha code other than HA, the county's payroll must define the code used.

NOTICES OF ACTION

Attached are reproducible copies of the Notice of Action (NOA) message language (on the appropriate manual NOA forms) to be used when a nonrecurring special need payment is requested for homeless assistance.

The NOAs are in two column format and meet the Turner standards effective May 1, 1987. Counties have the option of transferring the message language and computations to any other appropriate form (i.e., the NA 990). The NOAs must be printed with the NA back 6.

English versions are attached; Spanish translations will be sent out the week of January 19, 1988; Chinese, Vietnamese, Laotian, Hmong and Cambodian translations will follow.

AFDC NOA language has not been developed by the State for cases in which recipients request direct vendor payments.

M44-211A (Approve) -- Use to approve a nonrecurring special need payment for temporary shelter. Indicate in the right hand column the number of nights this payment is for, and the total temporary shelter aid being paid for this number of nights.

M44-211B (Approve) -- Use to approve a nonrecurring special need payment for permanent housing. Complete the right hand column, showing the total amount of permanent housing to be paid.

M44-211C (Approve) -- Use to approve a nonrecurring special need payment when both temporary shelter and permanent housing are to be paid. Show in the right hand column the separate calculations for each.

M44-211D (Deny) -- Use to deny a request for homeless assistance for temporary shelter and/or permanent housing. Check the boxes that apply. Indicate 80% of the assistance unit's MAP.

Also attached are AFDC NOA Handbook pages for each of the four Homeless Assistance messages. Additionally, handbook pages will be included with the next Handbook update package.

NOTICE OF ACTION

COUNTY OF _____

STATE OF CALIFORNIA
HEALTH AND WELFARE AGENCY
DEPARTMENT OF SOCIAL SERVICES

Notice Date : _____
Case Name : _____
Number : _____
Worker Name : _____
Number : _____
Telephone : _____
Address : _____

(ADDRESSEE)

Questions? Ask your Worker.

State Hearing: If you think this action is wrong, you can ask for a hearing. The back of this page tells how. Your benefits may not be changed if you ask for a hearing before this action takes place.

As of _____, the County has approved your request for homeless aid for temporary shelter.

The amount of your homeless aid is \$ _____.

You can get \$ _____ a night for temporary shelter. The amount of your aid is figured on this notice.

If you do not find a permanent place to live by _____, you may be able to get more temporary shelter aid. Come back to this office no later than _____.

You can get homeless aid for temporary shelter for up to 3 weeks in a row in any 12 month period if you are homeless. You may get it for up to 4 weeks if there is a good reason. After this time passes, you can't get temporary shelter aid again until _____.

Also, you may be able to get homeless aid for permanent housing when you find a place to live. You can get aid for permanent housing if your rent is no more than 80% of your needs.

Basic Needs for _____ Persons: \$ _____
x .80

Total Amount Your Housing
Can Cost: = \$ _____

When you find a place to live, get a note from the landlord telling how much your rent will be.

☐ You will get another notice about your Medi-Cal.

Rules: These rules apply; you may review them at your welfare office: MPP 44-211.5

Temporary Shelter Aid

Amount per night: \$ _____
Nights: x _____
Total Temporary Shelter Aid: = \$ _____

NOTICE OF ACTION

COUNTY OF _____

STATE OF CALIFORNIA
HEALTH AND WELFARE AGENCY
DEPARTMENT OF SOCIAL SERVICES

Notice Date _____
Case Name _____
Number _____
Worker Name _____
Number _____
Telephone _____
Address _____

(AMPR 55FF)

Questions? Ask your Worker.

State Hearing: If you think this action is wrong, you can ask for a hearing. The back of this page tells how. Your benefits may not be changed if you ask for a hearing before this action takes place.

As of _____, the County has approved your request for homeless aid for permanent housing.

You will get homeless aid for permanent housing on _____.

The amount of your homeless aid is \$_____. This is for:

- ☐ Last month's rent
☐ Security deposits
☐ Utility deposits.

The amount you can get is based on how much rent you will be paying. The most homeless aid you can get for permanent housing is two months of rent plus the cost of utility deposits. You cannot get more than this even if your housing costs more.

The amount you will get is figured on this notice.

You can get homeless aid for permanent shelter only one time in a 12 month period. You can't get homeless aid again until _____.

- ☐ You will get another notice about your Medi-Cal.

Rules: These rules apply; you may review them at your welfare office: MPP 44-211.5

Actual Cost of Housing

Amount of Last Month's Rent: \$ _____
Amount of Security Deposits: + _____
Amount of Utility Deposits: + _____
Your Total Cost of Housing = \$ _____

Highest Amount of Homeless Aid You Can Get

Amount of Monthly Rent: \$ _____
x 2
= _____
Amount of Utility Deposits: + _____
Most Aid You Can Get = \$ _____

Your total housing costs are ☐ less ☐ more than the highest amount of aid you can get, so you will get \$_____.

NOTICE OF ACTION

COUNTY OF

STATE OF CALIFORNIA
HEALTH AND WELFARE AGENCY
DEPARTMENT OF SOCIAL SERVICES

Notice Date : _____
Case Name : _____
Number : _____
Worker Name : _____
Number : _____
Telephone : _____
Address : _____

(ADDRESSEE)

Questions? Ask your Worker.

State Hearing: If you think this action is wrong, you can ask for a hearing. The back of this page tells how. Your benefits may not be changed if you ask for a hearing before this action takes place.

As of _____, the County has approved your request for homeless aid for temporary shelter and permanent housing.

The total amount of homeless aid you will get is \$_____.

You will get \$_____ a night for _____ nights of temporary shelter.

After that, you will move into your new home on _____.

You will get \$_____ for permanent housing.

You can get an amount of aid for permanent housing that is the same amount as two months' rent, plus the cost of utility deposits.

The total amount of homeless aid you will get for temporary shelter and permanent housing is figured on this notice.

You can get homeless aid only once in a 12 month period. You can't get homeless aid again until _____.

Temporary Shelter Aid

Amount per night: \$ _____
Nights: x _____
Total Temporary Shelter Aid: = \$ _____

Permanent Housing Aid

Actual Cost of Housing:

Amount of Last Month's Rent: \$ _____
Amount of Security Deposits: + _____
Amount of Utility Deposits: + _____
Your Total Cost of Housing: = \$ _____

Highest Amount of Permanent Housing Aid You Can Get:

Amount of Monthly Rent: \$ _____
x 2
= _____

Amount of Utility Deposits: + _____

Highest Amount of Aid You Can Get: = \$ _____

Your total permanent housing costs are ☐ less ☐ more than the highest amount of aid you can get, so you will get \$_____ in permanent housing aid.

Total

Temporary Shelter Aid: \$ _____
Permanent Housing Aid: + _____
= \$ _____

☐ You will get another notice about your Medi-Cal.

Rules: These rules apply; you may review them at your welfare office: MPP 44-211.5

NOTICE OF ACTION

COUNTY OF _____

STATE OF CALIFORNIA
HEALTH AND WELFARE AGENCY
DEPARTMENT OF SOCIAL SERVICES

Notice Date : _____
Case Name : _____
Number : _____
Worker Name : _____
Number : _____
Telephone : _____
Address : _____

(ADDRESSEE)

Questions? Ask your Worker.

State Hearing: If you think this action is wrong, you can ask for a hearing. The back of this page tells how. Your benefits may not be changed if you ask for a hearing before this action takes place.

The county has denied your request for homeless aid for:

- ☐ Temporary Shelter
☐ Permanent Housing

Dated _____

Here's why:

- ☐ You are not homeless.

To get homeless aid, you must meet one of these rules:

You do not have your own place to stay at night,

OR

You are staying at night in a shelter that is temporary,

OR

The place you are living in is a place that people do not usually live.

- ☐ You have more than \$100. To get homeless aid, you can't have more than \$100 in liquid resources.
☐ You do not have a permanent place to live.
☐ The place you found to live costs too much. It costs _____. To get aid for permanent housing, the place you find to live cannot cost more than 80% of your family's needs. 80% of your family's needs is figured on this notice.
☐ You already got homeless aid in this 12 month period. You can get homeless aid only once in any 12 month period. You can't get homeless aid again until _____.

IF ANY OF THESE THINGS CHANGE, YOU MAY BE ABLE TO GET HOMELESS AID FOR TEMPORARY SHELTER AND PERMANENT HOUSING. YOU CAN APPLY AGAIN.

- ☐ You will get another notice about your Medi-Cal.

Rules: These rules apply; you may review them at your welfare office: MPP 44-211.5

Basic Need for _____ Persons: \$ _____
x .80
Total Amount Your Housing Can
Cost (80% of Needs): = \$ _____

Auto ID No. :
Flow Chart No. :
Source : Homeless Regs
Regulation Cite: MPP 44-211.5

Form No. : NA 290
Effective Date : 02/01/88
Revision Date :

MESSAGE: As of _____, the County has approved your request for homeless aid for temporary shelter.

The amount of your homeless aid is \$_____.

You can get \$_____ a night for temporary shelter. The amount of your aid is figured on this notice.

If you do not find a permanent place to live by _____, you may be able to get more temporary shelter aid. Come back to this office no later than _____.

You can get homeless aid for temporary shelter for up to 3 weeks in a row in any 12 month period if you are homeless. You may get it for up to 4 weeks if there is a good reason. After this time passes, you can't get temporary shelter aid again until _____.

Also, you may be able to get homeless aid for permanent housing when you find a place to live. You can get aid for permanent housing if your rent is no more than 80% of your needs.

Basic Needs for ___ persons: \$ _____
x .80
Total Amount Your Housing
Can Cost: \$ _____

When you find a place to live, get a note from the landlord telling how much your rent will be.

Temporary Shelter Aid
Amount per night: \$ _____
Nights: x _____
Total Temporary
Shelter Aid: = \$ _____

INSTRUCTIONS: Use to approve a nonrecurring special need (homeless assistance) payment for temporary shelter.

Complete the fill-in items to inform the applicant of the temporary shelter payment conditions.

Use the right hand column to show the Temporary Shelter Aid computation part of the message.

State of California
Department of Social Services

Manual Filing No.: M44-211B
Action : Approve
Reason: Homeless Eligibility
Title: Permanent Housing

Auto ID No. :
Flow Chart No. :
Source : Homeless Regs
Regulation Cite: MPP 44-211.5

Form No. : NA 290
Effective Date : 02/01/88
Revision Date :

MESSAGE: As of _____, the County has approved your request for homeless aid for permanent housing.

You will get homeless aid for permanent housing on _____.

The amount of your homeless aid is \$ _____. This is for:

- ☐ Last month's rent
- ☐ Security deposits
- ☐ Utility deposits

The amount you can get is based on how much rent you will be paying. The most homeless aid you can get for permanent housing is two months of rent plus the cost of utility deposits. You cannot get more than this even if your housing costs more.

The amount you will get is figured on this notice.

You can get homeless aid for permanent shelter only one time in a 12 month period. You can't get homeless aid again until _____.

Actual Cost of Housing

Amount of Last Month's Rent: \$ _____
Amount of Security Deposits: + _____
Amount of Utility Deposits: + _____

Your Total Cost of Housing = \$ _____

Highest Amount of Homeless Aid You Can Get

Amount of Monthly Rent: \$ _____
x 2
= _____
Amount of Utility Deposits: + _____

Most Aid You Can Get: = \$ _____

Your total housing costs are ☐ less ☐ more than the highest amount of aid you can get, so you will get \$ _____.

INSTRUCTIONS: Use to approve a nonrecurring special need (homeless assistance) payment for temporary shelter.

Complete the fill-in items to inform the applicant of the permanent housing conditions. Check the appropriate box(es).

Use the right hand column to show the computations for Actual Cost of Housing and Highest Amount of Homeless Aid You Can Get.

State of California
Department of Social Services

Manual Reg. No.: M44-211C
Action : Approve
Reason: Homeless Eligibility
Title: Temporary Shelter
and Permanent Housing
Form No. : NA 290
Effective Date : 02/01/88
Revision Date :

Auto ID No. :
Flow Chart No. :
Source : Homeless Regs
Regulation Cite: MPP 44-211.5

MESSAGE: As of _____, the County has approved your request for homeless aid for temporary shelter and permanent housing.

The total amount of homeless aid you will get is \$_____.

You will get \$_____ a night for _____ nights for temporary shelter.

After that, you will move into your new home on _____.

You will get \$_____ for permanent housing.

You can get an amount of aid for permanent housing that is the same amount as two months' rent, plus the cost of utility deposits.

The total amount of homeless aid you will get for temporary shelter and permanent housing is figured on this notice.

You can get homeless aid only once in a 12 month period. You can't get homeless aid again until _____.

Temporary Shelter Aid

Amount per night: \$ _____
Nights: x _____
Total Temporary
Shelter Aid: = \$ _____

Permanent Housing Aid

Actual Cost of Housing:

Amount of Last Month's Rent: \$ _____
Amount of Security Deposits: + _____
Amount of Utility Deposits: + _____
Your Total Cost of Housing: = \$ _____

Highest Amount of Permanent Housing Aid
You Can Get:

Amount of Monthly Rent: \$ _____
x 2
= _____
Amount of Utility Deposits: + _____
Highest Amount of Aid You Can Get: = \$ _____

Your total permanent housing costs are [] less [] more than the highest amount of aid you can get, so you will get \$_____ in permanent housing aid.

Total

Temporary Shelter Aid: \$ _____

Permanent Housing Aid: + _____

= \$ _____

INSTRUCTIONS: Use to approve a nonrecurring special need payment when both temporary shelter and permanent housing are to be paid.

Complete the fill-in items informing the applicant of the temporary shelter and permanent housing conditions.

Use the right hand column to show the calculations for Temporary Shelter Aid and Permanent Housing Aid. Check the appropriate box in the Permanent Housing Aid section.